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7590

04/08/2002

Morgan, Lewis & Bockius LLP
1111 Pennsylvania Avenue, NW
Washington, D.C. 20004
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APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
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08/980,395

11/28/1997

HARALD W. SONTHEIMER

DS858D+

6976

TITLE OF INVENTION: NOVEL METHOD OF DIAGNOSING AND TREATING GLIOMAS

51530-5003-05

TOTAL CLAIMS	APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
9	nonprovisional	YES	\$640	\$300	\$940	07/08/2002

EXAMINER	ART UNIT	CLASS-SUBCLASS
HUFF, SHEELA JITENDRA	1642	514-002000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Use of PTO form(s) and Customer Number are recommended, but not required.

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2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1. MORGAN, LEWIS &

2. BOCKIUS LLP

3. _____

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

UAB RESEARCH FOUNDATION

Birmingham, Alabama

Please check the appropriate assignee category or categories (will not be printed on the patent) ☐ individual ☒ corporation or other private group entity ☐ government

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(Authorized Signature) _____ (Date) _____

Michael S. Tuscan (RG# 43,210)

4-29-02

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